



PTO/SB/21 (04-04)

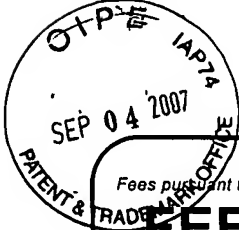
JFD

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/645,821	
	Filing Date	August 20, 2003	
	First Named Inventor	Graham	
	Art Unit	2179	
	Examiner Name	Theriault, S. B.	
Total Number of Pages in This Submission	7	Attorney Docket Number	015358-006520US

ENCLOSURES (Check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form (orig + 1 cc.) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Communication <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Return Receipt Postcard 2. Three (7) references		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td></tr></table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Townsend and Townsend and Crew LLP George B. F. Yee Reg. No. 37,478
Signature	
Date	August 31, 2007

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: August 31, 2007	
Typed or printed name	Christopher R. Fitting
Signature	
Date	August 31, 2007



Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

**Complete if Known**

Application Number	10/645,821
Filing Date	August 20, 2003
First Named Inventor	Graham
Examiner Name	Theriault, S. B.
Art Unit	2179
Attorney Docket No.	015358-006520US

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP

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☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)      Multiple Dependent Claims  
\_\_\_\_\_ -20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \$0      Fee (\$)      Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)  
\_\_\_\_\_ -3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \$0

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)  
\_\_\_\_\_ - 100 = \_\_\_\_\_ / 50 = \_\_\_\_\_ (round up to a whole number) x \_\_\_\_\_ = \_\_\_\_\_

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement (After office action)

Fees Paid (\$)

180.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent) 37,478	Telephone (650) 326-2400
Name (Print/Type)	George B. F. Yee		Date August 27, 2007

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

On \_\_\_\_\_

TOWNSEND and TOWNSEND and CREW LLP

PATENT  
Attorney Docket No.: 015358-006520US  
Client Reference No.: ID-RSV-263F

8/31/07

*Ch T. H.*



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

JAMEY GRAHAM et al.

Application No.: 10/645,821

Filed: August 20, 2003

For: PAPER-BASED INTERFACE FOR  
SPECIFYING RANGES

Confirmation No.: 7875

Examiner: Steven B. Theriault

Art Unit: 2179

SUPPLEMENTAL INFORMATION  
DISCLOSURE STATEMENT UNDER  
37 CFR §1.97 and §1.98

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

09/04/2007 HEEBREM1 00000246 201430 10645021

01 FC:1006 100.00 DA

Sir:

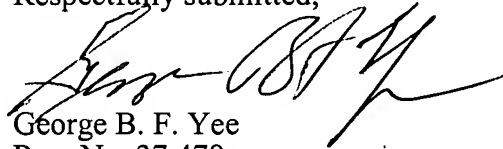
The references cited on the attached PTO/SB/08A and PTO/SB/08B forms are being called to the attention of the Examiner. Copies of the references [in compliance with the requirements of 37 CFR §1.98(a)(2)] are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR 1.97(g) and (h), no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant

information, and no inference should be made that the information and references cited are, or are considered to be material to patentability because they are in this statement. No inference should be made that the information and references cited are prior art merely because they are in this statement.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance. Please charge the IDS fee of \$180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

  
George B. F. Yee  
Reg. No. 37,478

TOWNSEND and TOWNSEND and CREW LLP  
Two Embarcadero Center, Eighth Floor  
San Francisco, California 94111-3834  
Tel: 650-326-2400  
Fax: 650-326-2422  
GBFY:crf



Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

**Complete if Known**

Application Number	10/645,821
Filing Date	August 20, 2003
First Named Inventor	Graham, Jamey
Art Unit	2179
Examiner Name	Steven B. Theriault
Attorney Docket Number	015358-006520US

Sheet	1	of	2
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**U.S. PATENT DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code <sup>2</sup> (if known)			
	AA	US-7,131,058	10-31-2006	Lapstun	
	AB	US-6,923,721	08-02-2005	Luciano et al.	
	AC	US-6,529,920	03-04-2003	Arons et al.	
	AD	US-5,764,368	06-09-1988	Shibaki et al.	
	AE	US-5,749,735	05-12-1998	Redford et al.	
	AF	US-5,628,684	05-13-1997	Bouedec	
	AG	US-5,624,265	04-29-1997	Redford et al.	
	AH	US-5,438,426	08-01-1995	Miake et al.	
	AI	US-4,831,610	05-16-1989	Hoda et al.	
	AJ	US-2003/0117652 A1	06-26-2003	Lapstun	
	AK	US-2003/0088582 A1	05-08-2003	Pflug	
	AL	US-2003/0084462 A1	05-01-1989	Kubota et al.	

**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>
		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
	AM	GB	2 331 378	A	05-19-1999			<input type="checkbox"/>
	AN	WO	99/18523	A1	04-15-1999			<input type="checkbox"/>

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Kind Codes of U.S. Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

**(Use as many sheets as necessary)**

Sheet

2

of

2

## Application Number

10/645,821

Filing Date

August 20, 2003

***First Named Inventor***

Graham, Jamey

Art Unit

2179

Examiner Name

Steven B. Theriault

Attorney Docket Number

015358-006520US

Examiner  
Initials \*

Cite  
No.<sup>1</sup>

Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.

T<sup>2</sup>

AO

LAMMING et al., "Using Automatically Generated Descriptions of Human Activity to Index Multi-Media Data," IEEE Multimedia Communications and Applications IEE Colloquium, February 7, 1991, abstract and pages 5/1-5/2.



Examiner  
Signature

Date  
Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.